DEPARTMENT OF SOCIAL SERVICES

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akota's Foundation and Our Future

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ATTENTION: **Providers and Billing Professionals**

FROM: South Dakota Medicaid

RF: **Billing Guidance: Immunizations**

Pursuant to the CMS Federal EPSDT Review, it has been determined that the South Dakota Medicaid claims processing system requires two-line immunization billing. The current methodology is not HIPAA compliant as it does not distinguish between a state supplied vaccine and a privately purchased vaccine. To meet compliance requirements, the revised billing procedure will require both the vaccine and administration to be entered on separate lines. SD Medicaid will reimburse for the administration fee only (Procedure Codes 90471 – 90474) when the vaccine has been supplied by the VFC program. The vaccine code will be paid at **zero**.

As your system may not accept a zero dollar amount in the charge field, SD Medicaid has reprogrammed its system to pay all eligible claims at zero. If the provider purchased the vaccine, the provider must submit a hard-copy claim with a copy of the purchase invoice to receive the reimbursement for the cost of the vaccine.

The following procedure codes must be billed utilizing the two-line billing process in order to receive proper reimbursement (payment methodology has been included for your convenience):

- 90633 Hepatitis A Vaccine, pediatric/adolescent dosage. Pay "0" age 1 thru 18. Pay allowable age 19 and over.
- 90647 Hemophilus Influenza B Vaccine (HIB), PRP OMB Conjugate. Pay "0" age 0 thru 4. Pay allowable age 5 and over.
- 90648 Hemophilus Influenza B Vaccine (HIB), PRP-T Conjugate. Pay "0" age 0 thru 4. Pay allowable age 5 and over.
- 90649 Human Papilloma Virus (HPV) Vaccine, Types 6, 11, 18 Pay "0" age 11 thru 18. Pay allowable age 9 and 10, 19 and 20,
- 90655 Influenza Virus Vaccine, Split Virus, Preservative Free, when administered to children 6 35 months. Pav "0"
- 90656 Influenza Virus Vaccine, Split Virus, Preservative Free, when administered to individuals 3 years and older. Pay "0" ages 3 thru 18. Pay allowable age 19 and over.
- 90657 Influenza Virus Vaccine, Split Virus, when administered to children 6 thru 35 months. Pay "0".
- 90658 Influenza Virus Vaccine, Splint Virus, when administered to individuals 3 years and older. Pay "0" ages 3 thru 18. Pay allowable ages 19 and over.

- 90669 Pneumococcal Conjugate Vaccine, Polyvalent, for children under 5 years. Pay "0".
- 90680 Rotavirus Vaccine, Pentavalent, 3 dose schedule, live, for oral use. Pay "0".
- 90698 Diphtheria, Tetanus Toxoids, A-cellular Pertussis Vaccine, Hemophilus Influenza Type B and Poliovirus Vaccine, Inactivated (DTAP, HIB, IPV). Pay "0" for ages 0 thru 4. Pay Allowable for 5 and over.
- **90700** Diphtheria, Tetanus Toxoids and A-cellular Pertussis Vaccine (DTAP), when administered to individuals younger than 7 years. Pay "0".
- **90702** Diphtheria and Tetanus Toxoids (DT) Absorbed, when administered to individuals younger than 7 years. Pay "0".
- **90707** Measles, Mumps, and Rubella Virus Vaccine (MMR), Live, for Subcutaneous Use. Pay "0" ages 1 thru 18. Pay allowable for 19 years and older.
- **90713** Poliovirus Vaccine, Inactivated (IPV), for Subcutaneous or Intramuscular use. Pay "0" ages 0 thru 18. Pay allowable ages 19 and older.
- **90714** Tetanus and Diphtheria Toxoids (TD) Absorbed, Preservative-free, when administered to individuals 7 years or older. Pay "0" ages 7 thru 10. Pay allowable ages 11 and older.
- 90715 Tetanus, Diphtheria Toxoids and A-cellular Pertussis Vaccine (DTAP), when administered to individuals 19 years or older. Pay "0" ages 11 thru 18. Pay allowable ages 7 thru 10 and 19 and older.
- **90716** Varicella Virus Vaccine, Live, for Subcutaneous use. Pay "0" ages 1 thru 18. Pay allowable ages 19 and older.
- **90723** Diphtheria, Tetanus Toxoids, A-cellular Pertussis Vaccine, Hepatitis B, and Poliovirus Vaccine. Pay "0" under 7 years of age.
- 90734 Meningococcal (MCVA). Pay "0" ages 11 thru 18. Pay allowable for ages 10 and under and 19 and older.
- 90743 Hepatitis B (Adolescent). Pay "0" ages 0 thru 18. Pay allowable at age 19 and 20.
- 90744 Hepatitis B (Pediatric Adolescent). Pay "0" ages 0 thru 18. Pay allowable at age 19 and 20.

If you have any questions regarding these changes, please contact us in-state at 1-800-452-7691, or out-of-state at 605-945-5006. Thank you for your cooperation

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